

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Patrick P. Russo et al.

Serial No.: N/A

Examiner: Unknown

Filing Date: Herewith

Group Art Unit: Unknown

For: ROLLED TIP RECOVERY CATHETER

Docket No.: 19369/115/101

TRANSMITTAL SHEETAssistant Commissioner for Patents
Washington, D.C. 20231

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certifies that this paper or papers, as described herein, are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of : EL 154 443 557 US, in an envelope, address to: U.S. Patent and Trademark Office, P.O. Box 2327, Arlington, VA 22202 on this 12 day of February 2002.

By

Melissa A. Abeldgaard
Melissa A. Abeldgaard

We are transmitting herewith the attached Patent Application including the following:

- ☒ 14 sheet(s) of specification.
- ☒ 7 sheet(s) of claim(s).
- ☒ 1 sheet(s) of Abstract.
- ☒ 3 sheet(s) of formal drawings.
- ☒ Executed Declaration and Power of Attorney.
- ☐ Applicant claims small entity status under 37 CFR § 1.27.
- ☒ An Assignment of the invention to Microvena Corporation is being filed contemporaneous with this patent application.
- ☐ A certified copy of a _____ application, serial no. _____, filed _____, the right of priority of which is claimed under 35 U.S.C. 119.

CLAIMS AS FILED						
	(1)	(2)	SMALL ENTITY		OTHER	
FOR:	# FILED	# EXTRA	Rate	Fee	Rate	Fee
BASIC FEE				\$370		\$740
TOTAL CLAIMS	34-20 =	14	x9=	\$	x18=	\$252
INDEPENDENT CLAIMS	4-3 =	1	x42=	\$	x84=	\$84
() MULTIPLE DEPENDENT CLAIM PRESENTED			+140=	\$	+280=	\$
TOTAL			\$		\$1,076	

*If the difference in Column (1) is less than zero, enter "0" in Column 2.

- ☒ Other Recordation Form Cover Sheet for Patents Only; Assignment.
- ☒ A check in the amount of \$1,076.00 and \$40.00 is enclosed.
- ☒ Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account 14-0620.

By:

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